

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE TYPE)		OFFICE USE ONLY	
CHECK APPROPRIATE BOX: <input checked="" type="checkbox"/> Original Appointment <input type="checkbox"/> Deputy Treasurer <input type="checkbox"/> Reappointment of Treasurer <input type="checkbox"/> Secondary Depository			
Name of Candidate <u>Elsa M. URQUIZA</u>		1. Address (include post office box or street, city, state, zip code) <u>227 E. Rivo Alto Dr.</u> <u>Miami Beach, FL 33139</u>	
Telephone (optional) <u>(305) 538-4634</u>	2. Party (Partisan candidates only)	3. Office (add district, circuit, group number) <u>Commissioner - Group 5 (v)</u>	
I have appointed the following person to act as my <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer			
4. Name of Treasurer or Deputy Treasurer <u>Edward A. CANTAS</u>			
5. Mailing Address (if post office box or drawer add street address) <u>4141 Collins Ave. Apt. 509</u>		6. Telephone <u>(305) 804-8008</u>	
7. City <u>Miami Beach</u>	8. County <u>Dade</u>	9. State <u>FL</u>	10. Zip Code <u>33139</u>
I have designated the following named bank as my <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
11. Name of Bank <u>Washington Mutual</u>		12. Street Address <u>Dade Blvd Branch</u>	
13. City <u>Miami Beach</u>	14. County <u>Dade</u>	15. State <u>FL</u>	16. Zip Code <u>33139</u>
17. Signature of Candidate <u>X Elsa M. Urquiza</u>		Date <u>6/12/06</u>	
Campaign Treasurer's Acceptance of Appointment			
I, <u>Edward A. CANTAS</u> , do hereby accept the appointment as (Please Print or Type)			
<input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer for the campaign of <u>Elsa M. URQUIZA</u> , who is seeking nomination or election as a _____ candidate to the office of _____			
<u>Commissioner-Group 5</u> (Party) <u>Dade</u> As a duly registered voter in _____			
County, Florida, I am qualified to accept this appointment.			
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.			
<u>6/12/06</u> Date		<u>X E. Cantas</u> Signature of Campaign Treasurer or Deputy Treasurer	

DS-DE 9 (Rev. 02/06)